PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduc	tion Act of 19	195, no person are re	equired to	respond to a collection				3 control numbe	
Effective on 12/08/2004.				Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				· · · · · · · · · · · · · · · · · · ·		10/594,918-Conf. #5532			
FEE TRANSMITTAL				Filing Date		September 29, 2006			
For FY 2009						Yoshinori ABE			
10111 2003				Examiner Name		N. T. Gugliotta			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		1794			
TOTAL AMOUNT OF PAYMENT		(\$) 810.00		Attorney Docket No.		4633-0189PUS1			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLF								Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FILI	NG FEES	SE	ARCH FEES	EXAM	INATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fees !	Paid (\$)	
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70	***************************************		
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0	***************************************		
2. EXCESS CLAIM FEES	220	110	Ů	v	Ü	Ü		Small Entity	
Fee Description Fee (\$)									
Each claim over 20 (including Reissues)							52	26	
Each independent claim over 3 (including Reissues)						220	110		
Multiple dependent claims				390	195				
Total Claims Fee (\$)		Fee Paid (\$)		Multiple Dependent Claims					
15 - ²³ or HP		x =			<u>F</u>	ee (\$)	Fee Paid (<u>5)</u>	
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims Extra Claims Fee (\$)		Fee (\$)	Fee Paid (\$)						
35 or HP = x =									
HP = highest number of independ	lent claims pa	aid for, if greater than	3.						
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
					tion there	eof Fee (\$)	Fee	Paid (\$)	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late fixed surcharge):\ 1801-Request for continued examination (RCE) (see 37 810.00									
Signature Registration No. 40,439 Telephone (703) 205-8035									
Signature (Attorney/Agent) 40,439									
Name (Print/Type) D. Richard	d Anderso	on				Date JAN	09 200	<u> </u>	

